FORM D

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UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

FORM D



NOTICE OF SALE OF SECURITIES PURSUANT TO REGULATION D. **SECTION 4(6), AND/OR** ORM LIMITED OFFERING EXEMPTION

OMB Number:	3235-0076							
Expires:	May 31, 2005							
Stimated average burden								
ours per resp	onse16.00							

OMB APPROVAL

SEC USE ONLY								
Prefix	Serial							
DATE RECI	EIVED							
	1							

Name of Offering (check if this is an amendment and name has changed, and indi	cate change.)
Maple Timber Acquisition LLC	
Filing Under (Check box(es) that apply): Rule 504 Rule 505 Rule 506	Section 4(6) ULOE
Type of Filing: New Filing Amendment	
A. BASIC IDENTIFICATION	IDATA (MAY 2 3 2005)
1. Enter the information requested about the issuer	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
Name of Issuer (check if this is an amendment and name has changed, and indicate	e change.)
Maple Timber Acquisition LLC	152 (0)
Address of Executive Offices (Number and Street, City, State, Zip Code	Telephone Number (Including Area Code)
Courthouse Plaza, NE, Dayton, Ohio 45463	(877)855-7243
Address of Principal Business Operations (Number and Street, City, State, Zip Code	Telephone Number (Including Area Code)
(if different from Executive Offices)	
Brief Description of Business: Through its subsidiaries, the acquisition of the coate	ed and carbonless papers group of MeadWestvaco
Corporation as well as timberland and related timber operations.	
Type of Business Organization	
corporation limited partnership, already formed	other (please specify):
☐ business trust ☐ limited partnership, to be formed	limited liability corporation
Actual or Estimated Date of Incorporation or Organization: Month Year	
GENERAL INSTRUCTIONS	INCMSON

Federal:

Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D or Section 4(6), 17 CFR 230.501 et seq. or 15 U.S.C. 77d(6).

When to File: A notice must be filed no later than 15 days after the first sale of securities in the offering. A notice is deemed filed with the U.S. Securities and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given below or, if received at that address after the date on which it is due, on the date it was mailed by United States registered or certified mail to that address.

Where to File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 20549.

Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

Information Required: A new filing must contain all information requested. Amendments need only report the name of the issuer and offering, any changes thereto, the information requested in Part C, and any material changes from the information previously supplied in Parts A and B. Part E and the Appendix need not be filed with the SEC.

Filing Fee: There is no federal filing fee.

State:

This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those states that have adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix to the notice constitutes a part of this notice and must be completed.

ATTENTION

Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal notice will not result in a loss of an available state exemption unless such exemption is predicated on the filing of a federal notice.

Enter the information requested for the following: Each promoter of the issuer, if the issuer has been organized within the past five years; Each beneficial owner having the power to vote or dispose, or direct the vote or disposition of, 10% or more of a class of equity securities of the issuer; Each executive officer and director of corporate issuers and of corporate general and managing partners of partnership issuers; and Each general and managing partner of partnership issuers. Check Box(es) that Apply: Promoter ☐ Beneficial Owner □ Director ■ Manager Full Name (Last name first, if individual) Vogel, Peter H. Business or Residence Address (Number and Street, City, State, Zip Code) Courthouse Plaza, NE, Dayton, Ohio 45463 Check Box(es) that Apply: Promoter Beneficial Owner ☐ Executive Officer □ Director ☐ Managing Partner Full Name (Last name first, if individual) Suwyn, Mark A. Business or Residence Address (Number and Street, City, State, Zip Code) Courthouse Plaza, NE, Dayton, Ohio 45463 Managing Partner Check Box(es) that Apply: Promoter ☐ Beneficial Owner ☐ Executive Officer □ Director Full Name (Last name first, if individual) Tessler, Lenard B. Business or Residence Address (Number and Street, City, State, Zip Code) C/o Cerberus Capital Management, L.P., 299 Park Avenue, New York, NY 10171 Managing Partner Check Box(es) that Apply: ☐ Promoter ☐ Beneficial Owner ☐ Executive Officer ☑ Director Full Name (Last name first, if individual) Wolf, Alexander M. Business or Residence Address (Number and Street, City, State, Zip Code) C/o Cerberus Capital Management, L.P., 299 Park Avenue, New York, NY 10171 Check Box(es) that Apply: Promoter ☐ Beneficial Owner ☐ Executive Officer ☐ Director Partner Full Name (Last name first, if individual) Business or Residence Address (Number and Street, City, State, Zip Code) Executive Officer Partner Check Box(es) that Apply: ☐ Promoter Beneficial Owner Director Full Name (Last name first, if individual) Business or Residence Address (Number and Street, City, State, Zip Code) ☐ Beneficial Owner ☐ Executive Officer Check Box(es) that Apply: ☐ Promoter ☐ Director Partner Full Name (Last name first, if individual) Business or Residence Address (Number and Street, City, State, Zip Code) Check Box(es) that Apply: ☐ Promoter ☐ Beneficial Owner ☐ Executive Officer ☐ Director Partner Full Name (Last name first, if individual) Business or Residence Address (Number and Street, City, State, Zip Code) (Use blank sheet, or copy and use additional copies of this sheet, as necessary.)

A. BASIC IDENTIFICATION DATA

				В. П	NFORMAT	TON ABO	UT OFFEI	RING				
											Yes	No
1. Has the issuer sold, or does the issuer intend to sell, to non-accredited investors in this offering?										\boxtimes		
Answer also in Appendix, Column 2, if filing under ULOE.												
2. What is the minimum investment that will be accepted from any individual?										\$none	!	
											Yes	No
3. Does th	e offering p	ermit joint	ownership (of a single i	unit?		•••••			·········		\boxtimes
commis a person states, l	ssion or sim n to be liste list the nam	ilar remune d is an asso e of the bro	ted for each ration for so ociated perso oker or deal forth the inf	olicitation on or agent er. If more	of purchaser of a broker than five (s in connect or dealer re (5) persons	tion with sa egistered w to be listed	les of secur ith the SEC are associa	ities in the and/or wited person	offering. If h a state or		
Full Name	(Last name	first, if ind	ividual)									
Business o	r Residence	Address (N	Number and	Street, City	y, State, Zip	Code)						
						·						
Name of A	ssociated B	roker or De	aler									
States in W	hich Perso	n Listed Ha	s Solicited o	or Intends to	o Solicit Pu	rchasers						
-	All States" o		lividual Stat	es)						**************		. All States
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[IL]	[IN]	[IA]	[KS]	[KY]	[LA]	[ME]	[MD]	[MA]	[MI]	[MN]	[MS]	[MO]
[MT] [RI]	[NE] [SC]	[NV] [SD]	[NH] [TN]	[NJ] [TX]	[NM] [UT]	[NY] [VT]	[NC] [VA]	[ND] [WA]	[OH] [WV]	[OK] [WI]	[OR] [WY]	[PA] [PR]
	(Last name											
	(— · · · · · ·	,	,									
Business o	r Residence	Address (N	Number and	Street, City	y, State, Zip	Code)						
Name of A	ssociated B	roker or De	ealer				<u> </u>					
			s Solicited								· <u>-</u>	
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[RI]	[SC]	[SD]	[TN]	[TX]	[UT]	[VT]	[VA]	[WA]	[WV]	[WI]	[WY]	[PR]
Full Name	(Last name	first, if ind	ividual)									
				1.00								
Business o	r Residence	: Address (N	Number and	Street, City	y, State, Zip	Code)						
Name of A	ssociated E	roker or De	ealer									
States in W	Vhich Perso	n Listed Ha	s Solicited	or Intends t	o Solicit Pu	rchasers		·				
			lividual Stat							************		. All States
[AL]	[AK]	[AZ]	[AR]	[CA]	[CO]	[CT]	[DE]	[DC]	[FL]	[GA]	[HI]	[ID]
[IL]	[IN]	[IA]	[KS]	[KY]	[LA]	[ME]	[MD]	[MA]	[MI]	[MN]	[MS]	[MO]
[MT]	[NE]	[NV]	[NH]	[NJ]	[NM]	[NY]	[NC]	[ND]	[OH]	[OK]	[OR]	[PA]
rrn	[SC]	[SD]	[TN]	[TX]	futi	[VT]	[VA]	[WA]	[WV]	rwn	[WY]	[PR]

(Use blank sheet, or copy and use additional copies of this sheet, as necessary.)

1.	Enter "0" if answer	offering price of securities included in this offering and the total amount already sold. is "none" or "zero." If the transaction is an exchange offering, check this box \square and mns below the amounts of the securities offered for exchange and already exchanged.					
	Type of Security	y		Aggregate Offering Price	•	Amo	unt Already Sold
	Debt		\$			\$	
	Equity	Paper Preferred Percentage Interests	\$ 19	6,750,000		\$196,	750,000
		Paper Class A and Class B Common Paper Percentage Interests	\$ 18	3,250,000		\$ 18,2	250,000
		Timber Percentage Interests	\$250	0,000,000		\$250,	000,000
		Timber Profits Interests	\$	11		\$	11
		□ Common □ Preferred					
	Convertible Sec	curities (including warrants)	\$			<u>\$</u>	
	Partnership Inte	erests	<u>\$</u>			<u>\$</u>	
	Other (Specify:	options to purchase Class A Common Percentage Interests)	\$	-0-		<u> </u>	-0-
	Total		_ \$46	5,000,011			,000,011
		Answer also in Appendix, Column 3, if filing under ULOE.				<u> </u>	
2.	offering and the agg	of accredited and non-accredited investors who have purchased securities in this gregate dollar amounts of their purchases. For offerings under Rule 504, indicate the who have purchased securities and the aggregate dollar amount of their purchases on or "0" if answer is "none" or "zero."					
				Number Investors		Do	Aggregate Ilar Amount Purchases
	Accredited Inve	stors		16		<u>\$</u> 465	,000,011
	Non-accredited	Investors					
	Total (i	for filings under Rule 504 only)	_				
3.	sold by the issuer, t	an offering under Rule 504 or 505, enter the information requested for all securities o date, in offerings of the types indicated, in the twelve (12) months prior to the first this offering. Classify securities by type listed in Part C - Question 1.					
	Type of offering	g		Type of Security		Do	llar Amount Sold
	T-4-1						
4.	a. Furnish a statem this offering. Exclusive may be given as sul	ent of all expenses in connection with the issuance and distribution of the securities in ude amounts relating solely to organization expenses of the issuer. The information bject to future contingencies. If the amount of an expenditure is not known, furnish an the box to the left of the estimate.	_				
	Transfer Agent	's Fees	.,			<u>\$</u>	
	Printing and En	graving Costs				<u>\$</u>	
	Legal Fees					<u>\$</u> _	
	Accounting Fee	es				<u>\$</u>	
	Engineering Fe	es				<u>\$</u>	
	Sales Commiss	ions (specify finders' fees separately)				<u>\$</u>	
	Other Expenses	s (identify)			\boxtimes	\$	-0-

C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS

Persons who respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB control number.

	C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AN	ID U	SE C)F PR	OCEED	S	
	b. Enter the difference between the aggregate offering price given in response to Part C - Quest and total expenses furnished in response to Part C - Question 4.a. This difference is the "adjusted proceeds to the issuer."	gross					\$ 465,000,011
5.	Indicate below the amount of the adjusted gross proceeds to the issuer used or proposed to be used for earthe purposes shown. If the amount for any purpose is not known, furnish an estimate and check the box left of the estimate. The total of the payments listed must equal the adjusted gross proceeds to the issue forth in response to Part C - Question 4.b above.	to the	!				
	Total III response to 1 at 6 - Question 4.0 above.			Öffi Direct	ents to cers, tors, & liates		Payments to Others
	Salaries and fees		\$_				\$
	Purchase of real estate		\$				\$ _
	Purchase, rental or leasing and installation of machinery and equipment		\$				\$_
	Construction or leasing of plant buildings and facilities		\$				\$
	Acquisition of other business (including the value of securities involved in this offering that may be used in exchange for the assets or securities of another						
	issuer pursuant to a merger)		\$			\boxtimes	\$ 465,000,011
	Repayment of indebtedness		\$				\$
	Working capital		\$				\$
	Other (specify):		\$_				\$
	Column Totals		\$,	\boxtimes	\$465,000,011
	Total Payments Listed (column totals added)			\boxtimes	\$ 465	<u>,000,0</u>	11
_	D. FEDERAL SIGNATURE				 		
sig	ne issuer has duly caused this notice to be signed by the undersigned duly authorized person. If this gnature constitutes an undertaking by the issuer to furnish to the U.S. Securities and Exchange Comformation furnished by the issuer to any non-accredited investor pursuant to paragraph (b)(2) of Rule	miss					
[ss	suer (Print or Type) Signature		_	D:	ate		
M	aple Timber Acquisition LLC				May 17,	2005	

Name of Signer (Print or Type)

Matthew L. Jesch

Authorized Signatory